

Attachment A  
General Instructions:

Each State must provide the information indicated below on its TANF program regardless of the funding source -- i.e., no matter whether the State used segregated Federal TANF funds, segregated State TANF funds, or commingled funds to pay for the benefit or service.

If the State elects to report on other benefits or activities provided through other program funding streams, please mention it after the TANF-funded benefits or activities for each item.

1. The State's definition of each work activity.

Core work activities are: 1. Unsubsidized employment - Employment in which the wages are not supported by federal funds. 2. Subsidized private sector employment - Private sector employment in which wages are supported by federal funds. 3. Subsidized public sector employment - Public sector employment in which wages are supported by federal funds. 4. On-the-job training (OJT) - Public or private employment for an individual to receive hands-on training at an employer's place of business. Reimbursement to the employer is through federal funding. 5. Job search and job readiness assistance - Activities designed to prepare an individual to enter the workplace and to learn behaviors and attitudes necessary to be successful on the job. Activities may include interview training, application and resume preparation, problem solving, life skills training, and short-term substance abuse treatment, mental health treatment, or rehabilitation activities. Because of Missouri's designation as a Needy State this work activity may be allowed for up to 12 weeks (240 or 360 hours based on hourly requirements) within the preceding 12 months. 6. Work experience (including work associated with the refurbishing of publicly assisted housing) - An unpaid assignment for individuals who lack previous employment experience and/or job readiness and need certain skills in order to be successful in unsubsidized employment. 7. Community service program - A structured program in which Temporary Assistance recipients perform work for the direct benefit of the community under the auspices of public or nonprofit organizations. Community service programs are limited to projects that serve a useful community purpose. Community service programs are an unpaid assignment to improve the employability of individuals by gaining soft skills and work experience. 8. Vocational Education and Training not to exceed a 12 month lifetime limit - Participation in programs offered through colleges, universities, community colleges, or other entity offering a course of study that leads toward a degree, certificate, or license including a baccalaureate or advanced degree. Non-core activities are: 1. Job skills training directly related to employment - Training or education for job skills required by an employer to provide an individual with the ability to obtain employment or to advance or adapt to the changing demands of the workplace. 2. Education directly related to employment - Education related to a specific occupation, job, or job offer, including a course of study leading to a baccalaureate or other advanced degree. 3. Satisfactory attendance at secondary school or in a GED program - Regular attendance, in accordance with the requirements of the secondary school or course of study, at a secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate.

2. A description of the transitional services provided to families no longer receiving

#### assistance due to employment.

Transportation related expenses, work related expenses and case management services may be provided, or up to 90 days after the closing of the Temporary Assistance case. Individual circumstances determine the need for continued supportive services. Child care assistance may continue as long as the individual remains eligible under income guidelines. Child care households with net income between 127% and 139% of the FPL will remain eligible for child care assistance at a 75% benefit reduction. Eligibility for this reduced benefit is referred to as Transitional Child Care (TCC). Food Stamp benefits are available to assist individuals who are no longer receiving Temporary Assistance. Change reporting policy for all households is simplified so that the only change required to be reported is when total household income exceeds 130% of poverty and when there is a reduction in the number of hours worked by ABAWD individuals. Other Food Stamp policy simplifications, which support the transition of working households from Temporary Assistance, include aligning vehicle policy with the Child Care policy to exempt the value of all vehicles. In Missouri, when a family loses eligibility for Temporary Assistance, the reason for the loss of cash may not affect MO HealthNet coverage. MO HealthNet eligibility (Missouri's Medicaid program) is not dependent on eligibility for Temporary Assistance. If the reason income exceeds the limits is due to earnings, the family is transferred to Transitional MO HealthNet unless they do not meet the requirement of 3 out of 6 months of receipt of Section 1931. If the family is not eligible for Transitional MO HealthNet or if the family loses eligibility due to other income, the family's eligibility is explored for all other categories of MO HealthNet. Missouri covers children up to 300% of the federal poverty level and pregnant women up to 185%. When a Temporary Assistance case is closed for failure to cooperate with a review of eligibility, the family continues on section 1931 Medicaid. If the Section 1931 Medicaid case is due for its annual review, then the MO HealthNet case can be reviewed. At that time a MO HealthNet only review form is used so that the family is clear that this review relates only to their MO HealthNet coverage. Other cash eligibility requirements, for example - failure to participate with work requirements or owning resources over the limit, do not affect MO HealthNet eligibility. Transitional Employment Benefit (TEB) must be explored for any Temporary Assistance case with earned income that closes due to excess income of the parent(s). TEB is a fifty dollar (\$50.00) payment to families for up to six (6) months when the family loses eligibility for Temporary Assistance benefits due to an increase in income, removal of an earnings disregard or an allowable expense deduction, or a household composition change which causes ineligibility due to income guidelines for Temporary Assistance.

#### 3. A description of how a State will reduce the amount of assistance payable to a family when an individual refuses to engage in work without good cause pursuant to 45 CFR 261.14 of this chapter.

If an individual in a family subject to work participation requirements fails to cooperate in developing the individual employment plan, without good cause, fails to comply with the individual employment plan, or without good cause refuses to engage in a required work activity, the Family Support Division shall reduce the amount of assistance otherwise payable to the family by 25%. The following constitute good cause for failure to participate or accept employment: 1. The employment would result in the family of the recipient experiencing a net loss of cash income. Net loss of cash income results if the family's gross income less necessary work-related expenses is less than the cash assistance the individual was receiving when the offer of employment was made. Gross income includes, but is not limited to, earnings, unearned income, and cash assistance; 2. Court required

appearance or incarceration; 3. Emergency family crisis that renders participation unreasonable; 4. Breakdown in transportation arrangements with no readily accessible alternative means of transportation; 5. Breakdown in child care arrangements or availability of child care not suited for special needs of the child for whom it is intended; or 6. Lack of identified social services necessary for participation and set forth in the individual employment plan. If the individual is a single custodial parent caring for a child under age six and if the individual has demonstrated the inability to work as determined by the Family Support, the Family Support Division shall not reduce assistance because of the individual's refusal to engage in required work because of one or more of the following reasons:  
 \*Unavailability of appropriate child care within reasonable distance from the individual's home or work site; \*Unavailability or unsuitability of informal child care by a relative or under other arrangements; or \*Unavailability of appropriate and affordable child care arrangements. NO HealthNet eligibility is not affected by an individual's failure to cooperate with Temporary Assistance work activities.

4. The average monthly number of payments for child care services made by the State through the use of disregards, by the following types of child care providers:

<u>i. Licensed/regulating in-home child care:</u>	0
<u>ii. Licensed/regulating family child care:</u>	0
<u>iii. Licensed/regulating group home child care:</u>	0
<u>iv. Licensed/regulating center-based child care:</u>	0
<u>v. Legally operating (i.e., no license category available in State or locality) in-home child care provided by a non-relative:</u>	0
<u>vi. Legally operating (i.e., no license category available in State or locality) in-home child care provided by a relative:</u>	0
<u>vii. Legally operating (i.e., no license category available in State or locality) family child care provided by a non-relative:</u>	0
<u>viii. Legally operating (i.e., no license category available in State or locality) family child care provided by a relative:</u>	0
<u>ix. Legally operating (i.e., no license category available in State or locality) group child care provided by a non-relative:</u>	0
<u>x. Legally operating (i.e., no license category available in State or locality) group child care provided by a relative:</u>	0
<u>xi. Legally operated (i.e., no license category available in State or locality) center-based child care:</u>	0

5. If the State has adopted the Family Violence Option and wants Federal recognition of its good cause domestic violence waivers under 45 CFR 260.50-58, then provide (a) a description of the strategies and procedures in place to ensure that victims of domestic violence receive appropriate alternative services and (b) an aggregate figure for the total number of good cause domestic waivers granted.

A study conducted for the Family Support Division (FSD) reinforces national findings that domestic violence in Missouri has a direct effect on the incidence of child abuse and neglect, women's employability, and the ability to collect child support. In response to those findings, FSD has chosen to adopt the Family Violence Option to develop policies and procedures that will enable staff to direct and assist victims of domestic violence in obtaining financial stability. Identified victims will be allowed good cause waiver from immediate work participation.

These waivers will be allowed providing they are: \*Granted appropriately, based on need, as determined by an assessment; \*Temporarily applied, for a period no to exceed six months; and \*Accompanied by an appropriate service plan designed to provide safety and lead to work. In order for FSD to better serve and develop realistic plans for these individuals, front line workers have a major role in identifying, assessing, and referring victims to domestic violence shelters, advocacy programs, Child Support Enforcement services, Children's Division, work participation, or any other available community resources. Screening for domestic violence is completed at the time of application for Temporary Assistance and at interim contacts where eligibility factors are reviewed. If domestic violence is identified, staff will assist in collecting information as it relates to participation in a work activity and cooperation with the assignment/collection of child support. A key element to the success of a participant's recovery from domestic violence is the existence of available resources. A directory published by Coalition Against Domestic Violence (MCADV), listing the State's service providers specializing in domestic violence issues, has been provided to each office. County offices are encouraged to make contact with the program servicing their area and develop a strategy of collaborating services. As of October 31, 2010, there were 122 families being granted an exclusion of good cause due to Domestic Violence.

**6. A description of any nonrecurrent, short-term benefits (as defined in 45 CFR 260.31(b)(1)) provided, including:**

**i. The eligibility criteria associated with such benefits, including any restrictions on the amount, duration, or frequency of payments;**

**ii. Any policies that limit such payments to families that are eligible for TANF assistance or that have the effect of delaying or suspending a family's eligibility for assistance;**

**iii. Any procedures or activities developed under the TANF program to ensure that individuals diverted from assistance receive information about, referrals to, or access to other program benefits (such as Medicaid and food stamps) that might help them make the transition from welfare to work.**

Missouri had the following short-term benefit programs: Summer Youth Employment Program: The Summer Youth Employment Program provided youth ages 14-24 with summer youth employment opportunities at public or private worksites. The program provided high exposure to eligible youth to a possible career of interest and/or field of study. All youth enrolled met Workforce Investment Act (WIA) eligibility guidelines as defined in 20CFR664.200. Summer Food Service Program: The Summer Food Service Program (SFSP) helps assure that eligible populations have access to nutritious meals during the summer months. When school is not in session, SFSP provides reimbursement to community agencies offering the required continuum of meals. Eligible participants include: children 0 through 18 years of age whose family incomes are less than or equal to 185 percent of the Federal Poverty Guidelines. SFSP contracts with schools and other community-based organizations to sponsor the local programs and provide meals that meet established guidelines. By increasing the nutrient intake of program participants, SFSP reduces their risk for health problems and enhances their learning capacities. The program also improves the quality of the summer programs offered in areas of economic need. Food Banks: The Food Banks provide food to Emergency food programs, which include local food pantries, soup kitchens, and short-term emergency shelters. Eligible participants include families with children 0 through 18 years of age whose family incomes are less than or equal to 185% of the Federal Poverty Guidelines. Domestic Violence Crisis Services: Services include

both shelter and non-residential domestic violence services: meeting the needs of families in a crisis by providing housing, counseling, health supplies, clothing, and related crisis services. All services are less than 120 days in duration. Eligible participants include families with children 0 through 18 years of age whose family incomes are less than or equal to 185% of the Federal Poverty Guidelines.

Homeless Shelters: Services include: shelter services, for less than 120 days, serving families facing an immediate homelessness crisis. Eligible participants include families with children 0 through 18 years of age whose family incomes are less than or equal to 185% of the Federal Poverty Level Guidelines.

**7. A description of the grievance procedures the State has established and is maintaining to resolve displacement complaints, pursuant to section 407(f)(3) of the Social Security Act. This description must include the name of the State agency with the lead responsibility for administering this provision and explanations of how the State has notified the public about these procedures and how an individual can register a complaint.**

The following policies are part of Missouri's TANF State Plan. This information is also on worksite agreements signed by the employer, employee and the agency that contracts with Family Support Division for work participation services. An adult receiving assistance through the Temporary Assistance program may fill a vacant position to engage in work activities. The adult must be guaranteed wages and benefits comparable to employees in like positions. An adult shall not be employed or assigned to a work activity if another individual is on layoff from the same or any substantially equivalent job; the employer has terminated the employment of any regular employee, reduced the hours of such employee, or caused an involuntary reduction in its workforce in order to fill the vacancy with an adult taking part in a work activity; or the employment opportunity is created by a strike, lockout, or other bona fide labor dispute. An individual who believes that he/she has been adversely affected by a violation of this requirement or the organization that is duly authorized to represent the employee shall be afforded an opportunity to grieve it. The individual or employee, or an organization that is authorized to represent the individual or employee, shall first attempt to remedy the alleged violation through a meeting with the employer within thirty (30) days of the request of the meeting. If the complaint is not resolved, the individual or employee may appeal to the Department of Labor and Industrial Relations commission. A hearing shall be conducted by the commission and a decision shall be rendered within forty-five (45) days of the hearing. If the individual or employee is aggrieved by the decision of the commission, he/she may file a petition for review in the circuit court in which he/she resides within thirty (30) days of the date of the decision. In addition, if it is found that the employer violated these provisions, the Division shall terminate the contract with the employer. Nothing in this paragraph shall preempt or supersede any provision of a collective bargaining agreement. If there is an existing grievance procedure in a collective bargaining agreement, it must be followed. Nothing in this paragraph shall preempt or supersede any provision of state or local law that provides greater protection for employees from job displacement.

**8. A summary of State programs and activities directed at the third and fourth statutory purposes of TANF (as specified at 45 CFR 260.20(c) and (d) of this chapter).**

**a. Summarize below, the State programs and activities directed at preventing and reducing the incidence of out-of-wedlock pregnancies and establishing annual numerical goals for preventing and reducing the incidence of these pregnancies**



**(TANF purpose 3):**

**Character Education:** This program provides funding to support Missouri's schools with training, consulting, and other resources necessary to ensure the success and continued existence of the character education process for students. This is a comprehensive project that includes components for school, home, and community. **Parents as Teachers Program.** This program is a parent education and family support program serving families from pregnancy until their child enters kindergarten. The program is designed to enhance child development as well as to support parents in their role as a child's first and most important teacher. **Parent education** is provided through four core components, including personal visits, group meetings, developmental screening, and resources. **A+ Schools Program:** this program provides resources to schools to enhance the learning environment and provides financial resources to students who attend community or junior college after high school graduation. The program benefits all students and improves the likelihood that the student will graduate from high school. **Missouri Pre-School Program:** This program provides funding to programs that prepare children prior to the age in which they are eligible to enroll in kindergarten to enter school ready to learn. It promotes high quality early childhood education programs for children who are one or two years from kindergarten entry. **Bright Flight scholarships:** This program provides merit-based scholarships to graduating seniors who enroll as first-time, full-time students at an approved Missouri school. Students who have a composite score on the ACT or the SAT in the top 3 percent of all Missouri students taking those tests by the June test date of their senior year in high school are eligible to receive this scholarship. **Ross-Barnett scholarships:** This program provides scholarships to students who are employed while attending school part-time. This is a needs-based scholarship program that is available to students who are enrolled at least half-time, but less than full-time, at participating Missouri postsecondary schools. The student must be employed and compensated for at least 20 hours per week.

**b. Summarize below, the State programs and activities directed at encouraging the formation and maintenance of two-parent families (TANF purpose 4):**

**9. An estimate of the total number of individuals who have participated in subsidized employment under §261.30(b) or (c) of this chapter. 369**

Attachment B 0  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Homeless Shelters
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Homeless Shelters
<u>3. Purpose(s) of Benefit or Service Program:</u> Homeless Shelters
<u>4. Program Type. (Check one)</u> <input checked="" type="radio"/> TANF <input type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> This is not a work activity program
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$6,061,142
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$6,061,142
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 1,322
<u>This last figure represents (Check one):</u> <input type="radio"/> The average monthly total for the fiscal year. <input checked="" type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> Eligible participants include: children 0 through 18 years of age whose family incomes are less than or equal to 185% of the federal poverty guidelines.
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input type="radio"/> Yes <input checked="" type="radio"/> No
<u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u> \$0

Attachment B 1  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

1. Name of Benefit or Service Program:

Cash Assistance

2. Description of the Major Program Benefits, Services, and Activities:

Cash Assistance

3. Purpose(s) of Benefit or Service Program:

Cash Assistance

4. Program Type. (Check one)

☒ TANF   ☐ State

5. Description of Work Activities (Complete only if this program is a separate State program):

This is not a work activity program.

6. Total State Expenditures for the Program for the Fiscal Year: \$98,050,604

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$44,013,707

8. Total Number of Families Served under the Program with MOE Funds: 15,346

This last figure represents (Check one):

☒ The average monthly total for the fiscal year.   ☐ The total served over the fiscal year.

9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

State TANF Plan page 3-9

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

☒ Yes   ☐ No

11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$0



Attachment B 2  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Cash Assistance
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Cash Assistance
<u>3. Purpose(s) of Benefit or Service Program:</u> Cash Assistance
<u>4. Program Type. (Check one)</u> <input type="radio"/> TANF <input checked="" type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> The following families receive Temporary Assistance cash under Separate State Program because they are exempt from defined* work activities and the 60 month lifetime limit. Payees who are age 60 and over. Payees who are permanently and totally disabled. Payees who are caring for a disabled individual in the home. Families receive Temporary Assistance cash under a Separate State Program because they have a child in the home under the age of one year and have received this exemption for more than 12 months. They are exempt from defined* work activities but they are not exempt from the mandatory 60 month lifetime limit for the receipt of Temporary Assistance. Teen parents receive Temporary Assistance cash under a Separate State Program. Those engaged in an educational work activity are exempt from the 60 month lifetime limit. Even though a payee may be exempt from participating in a defined* work activity, they are offered the opportunity to volunteer to participate and receive the same supportive services (transportation, work related expenses, etc.) as payees who are not exempt. *Work activities are defined on page one of this report. Two Parent families receive Temporary Assistance cash under a Solely State Funded Program.
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$7,670,025
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$7,670,025
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 2,674
<u>This last figure represents (Check one):</u> <input checked="" type="radio"/> The average monthly total for the fiscal year. <input type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> State TANF Plan page 3-9
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input checked="" type="radio"/> Yes <input type="radio"/> No

**11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$0**

Attachment B 3  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

1. Name of Benefit or Service Program:

Child Care

2. Description of the Major Program Benefits, Services, and Activities:

Child Care

3. Purpose(s) of Benefit or Service Program:

Child Care

4. Program Type. (Check one)

☒ TANF   ☐ State

5. Description of Work Activities (Complete only if this program is a separate State program):

This is not a work activity program.

6. Total State Expenditures for the Program for the Fiscal Year: \$170,337,360

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$51,002,283

8. Total Number of Families Served under the Program with MOE Funds: 15,097

This last figure represents (Check one):

☒ The average monthly total for the fiscal year.   ☐ The total served over the fiscal year.

9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

Income eligibility for child care exists when the adjusted gross income does not exceed the maximum based on the household size. Temporary Assistance households, defined as Temporary Assistance cash cases or \$10.00 minimum pay cases are eligible for Child Care Assistance without meeting the Temporary Assistance hourly work participation requirement. For households who show a need for child care, but are engaged in an eligible need component for a limited number of hours, the Child Care application will include a statement to show how Child Care Assistance supports the family's employability plan. If participants are in educational components, they must be attending at least half time as defined by the facility. The participant must make satisfactory progress in the educational component and be able to document this progress. The course of study must be consistent with a reasonable goal as reflected in an individual employment plan/self-sufficiency pact. A reasonable goal is one that leads to employment and/or increases the family's self-reliance.

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

☒ Yes   ☐ No

11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$0

Attachment B 4  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

1. Name of Benefit or Service Program:

Program Administration

2. Description of the Major Program Benefits, Services, and Activities:

Program Administration

3. Purpose(s) of Benefit or Service Program:

Program Administration

4. Program Type. (Check one)

☒ TANF   ☐ State

5. Description of Work Activities (Complete only if this program is a separate State program):

This is not a work activity program.

6. Total State Expenditures for the Program for the Fiscal Year: \$8,798,062

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$4,399,031

8. Total Number of Families Served under the Program with MOE Funds: 0

This last figure represents (Check one):

☐ The average monthly total for the fiscal year.   ☐ The total served over the fiscal year.

9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

Not applicable

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

☒ Yes   ☐ No

11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$0

Attachment B 5  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Data Processing System Costs
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Data Processing System Costs
<u>3. Purpose(s) of Benefit or Service Program:</u> Data Processing System Costs
<u>4. Program Type. (Check one)</u> <input checked="" type="radio"/> TANF <input type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> This is not a work activity program.
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$4,018,300
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$2,009,150
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 0
<u>This last figure represents (Check one):</u> <input type="radio"/> The average monthly total for the fiscal year. <input type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> not applicable
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input checked="" type="radio"/> Yes <input type="radio"/> No
<u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u> \$0

Attachment B 6  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<b><u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u></b>
<b><u>1. Name of Benefit or Service Program:</u></b> Other--Prevention of Out of Wedlock Pregnancy & 2-Parent Family Formation
<b><u>2. Description of the Major Program Benefits, Services, and Activities:</u></b> Character Education, Parents as Teachers, Missouri Pre-School Program-- Prevention of Out of Wedlock Pregnancy and 2-parent Family Formation
<b><u>3. Purpose(s) of Benefit or Service Program:</u></b> Prevention of Out of Wedlock Pregnancy & 2-Parent Family Formation
<b><u>4. Program Type. (Check one)</u></b> <input type="radio"/> TANF <input checked="" type="radio"/> State
<b><u>5. Description of Work Activities (Complete only if this program is a separate State program):</u></b> This is not a work activity program.
<b><u>6. Total State Expenditures for the Program for the Fiscal Year:</u></b> \$38,072,620
<b><u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u></b> \$19,034,635
<b><u>8. Total Number of Families Served under the Program with MOE Funds:</u></b> 6,637 <b><u>This last figure represents (Check one):</u></b> <input checked="" type="radio"/> The average monthly total for the fiscal year. <input type="radio"/> The total served over the fiscal year.
<b><u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u></b> Not applicable
<b><u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u></b> <input type="radio"/> Yes <input checked="" type="radio"/> No
<b><u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u></b> \$19,037,985



Attachment B 7  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Summer Youth Jobs
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Summer Youth Jobs
<u>3. Purpose(s) of Benefit or Service Program:</u> Summer Youth Jobs
<u>4. Program Type. (Check one)</u> <input checked="" type="radio"/> TANF <input type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> This is not a separate state program.
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$3,626,021
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$3,626,021
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 5,563 <u>This last figure represents (Check one):</u> <input type="radio"/> The average monthly total for the fiscal year. <input checked="" type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> All youth enrolled met Workforce Investment Act (WIA) eligibility guidelines as defined in 20CFR664.200.
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input type="radio"/> Yes <input checked="" type="radio"/> No
<u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u> \$0

Attachment B 8  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Summer Food Service Program
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Summer Food Service Program
<u>3. Purpose(s) of Benefit or Service Program:</u> Summer Food Service Program
<u>4. Program Type. (Check one)</u> <input checked="" type="radio"/> TANF <input type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> This is not a work activity program.
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$162,186
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$162,186
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 2,222
<u>This last figure represents (Check one):</u> <input type="radio"/> The average monthly total for the fiscal year. <input checked="" type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> Eligible participants include: children 0 through 18 years of age whose family incomes are less than or equal to 185% of the Federal Poverty Guidelines
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input type="radio"/> Yes <input checked="" type="radio"/> No
<u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u> \$0

Attachment B 9  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Food Bank Expenditures
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Food Bank Expenditures
<u>3. Purpose(s) of Benefit or Service Program:</u> Food Bank Expenditures
<u>4. Program Type. (Check one)</u> <input checked="" type="radio"/> TANF <input type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> This is not a work activity program.
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$53,354,573
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$53,354,573
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 710,804 <u>This last figure represents (Check one):</u> <input type="radio"/> The average monthly total for the fiscal year. <input checked="" type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> Eligible participants include: children 0 through 18 years of age whose family incomes are less than or equal to 185% of the Federal Poverty Guidelines.
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input type="radio"/> Yes <input checked="" type="radio"/> No
<u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u> \$0

Attachment B 10  
Grantee Information

<u>State</u> MISSOURI	<u>Fiscal Year</u> 2010
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Program Information

<u>Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.</u>
<u>1. Name of Benefit or Service Program:</u> Domestic Violence Crisis Services
<u>2. Description of the Major Program Benefits, Services, and Activities:</u> Domestic Violence Crisis Services
<u>3. Purpose(s) of Benefit or Service Program:</u> Domestic Violence Crisis Services
<u>4. Program Type. (Check one)</u> <input checked="" type="radio"/> TANF <input type="radio"/> State
<u>5. Description of Work Activities (Complete only if this program is a separate State program):</u> This is not a work activity program.
<u>6. Total State Expenditures for the Program for the Fiscal Year:</u> \$2,351,265
<u>7. Total State MOE Expenditures under the Program for the Fiscal Year:</u> \$2,351,265
<u>8. Total Number of Families Served under the Program with MOE Funds:</u> 1,267
<u>This last figure represents (Check one):</u> <input type="radio"/> The average monthly total for the fiscal year. <input checked="" type="radio"/> The total served over the fiscal year.
<u>9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:</u> Eligible participants include: children 0 through 18 years of age whose family incomes are less than or equal to 185% of the Federal Poverty Guidelines.
<u>10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)</u> <input type="radio"/> Yes <input checked="" type="radio"/> No
<u>11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No):</u> \$0

Certification  
Certify:

This certifies that all families for which the State claims MOE expenditures for the fiscal year meet the State's criteria for "eligible families."

Signature

Name

Title

Date Submitted

Approved OMB No. 0970-0248 Form ACF-204, expires 04/30/2009.